Exhibit 1
Glossary
Actinolite - One of six naturally occurring asbestos minerals. It is not normally used commercially.
Action level - a level of airborne fibers specified by OSHA as a warning or alert level. It is 0.1 fibers per cubic centimeter of air, 8-hour time-weighted average, as measured by phase contrast microscopy.
Addenda - changes to working drawings and specifications for a building made by the contracting office prior to the opening of bids on the project.
AHERA - Asbestos Hazard Emergency Response Act.
Algorithm - a formal numerical procedure for assessing suspect material; results are given a numerical score.

Amended water - A water to which a surfactant has been added.
Amosite - (brown asbestos) an asbestiform mineral of the amphibole group. It is second most commonly used form of asbestos in the U.S.
<u>Amphibole</u> - one of the two major groups of minerals from which the asbestiform minerals are derived. They are distinguished by their chain-like crystal structure and chemical composition. Amosite and crocidolite are examples of amphibole minerals.
Anthophyllite - one of six naturally occurring asbestos minerals. It is of limited commercial value.
As built drawings - drawings and specifications which represent the way a building was actually constructed.
<u>Asbestos</u> - a generic name given to a number of naturally occurring hydrated mineral silicates that possess a unique crystalline structure, are incombustible in air, and are separable into fibers. Asbestos includes the asbestiform varieties of chrysotile (serpentine), crocidolite (riebeckite), amosite (cummingtonite-grunerite), anthophyllite, actinolite, and tremolite.
<u>Asbestos bodies</u> - coated asbestos fibers often seen in the lungs of asbestos exposure victims.

Asbestos-containing material (ACM) - any material or product which contains more than 1 percent asbestos (AHERA definition).
Asbestosis - a scarring of the lungs caused by exposure to asbestos. Continued exposure may lead to degeneration of lung function and death.
Exhibit 1 (Continued)
Breeching - a duct which transports combustion gases from a boiler or heater to a chimney or stack. Also called flue.
Bulk samples - samples of bulk material, in the case of asbestos, suspect material.
Chain-of-custody - formal procedures for tracking samples and insuring their integrity from the time of collection till received by analysis laboratory.
Change order - A change to construction contract documents after a construction contract has been

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awarded by the contracting office.
<u>Claims-made insurance</u> - a form of insurance in which a claim is allowed only if the insurance is in effect when the claim is made, that is, when the injury or effect is observed.
<u>Contract documents</u> - legally binding building drawings and specifications. Also called construction contract documents.
<u>Crocidolite</u> - (blue asbestos) strongest of asbestos minerals. An asbestiform mineral of the amphibole group. It is of minor commercial value in the U.S.
<u>Chrysotile</u> - (white asbestos) the only asbestiform mineral of the serpentine group. It is the most common form of asbestos used in buildings.
Damaged friable surfacing (miscellaneous) material - friable surfacing (miscellaneous) ACM which has deteriorated or sustained physical injury such that the internal structure (cohesion) of the material is inadequate or, if applicable, which has delaminated such that the bond to the substrate (adhesion) is inadequate or which for any other reason lack fiber cohesion or adhesion qualities. Such damage or deterioration may be illustrated by the separation of ACM into layers; separation of ACM from the substrate; flaking, blistering, or crumbling of ACM surface; water damage; significant or repeated water stains, scrapes, gauges, mars or other signs of physical injury on the ACM. Asbestos debris originating from the ACBM in question may also indicate damage (AHERA definition).

Damaged or significantly damaged thermal system insulation - thermal system insulation on pipes, boilers, tanks, ducts, and other thermal system insulation equipment which the insulation has lost its structural integrity, or its covering, in whole or in part, is crushed, water-stained, gouged, punctured, missing, or not intact such that it is not able to contain fibers. Damage many be further illustrated by occasional punctures, gouges, or other signs of physical injury to ACM ends or joints. Asbestos debris, originating from the ACBM in question may also indicate damage (AHERA definition).
Exhibit 1 (Continued)
<u>Dose-response effect</u> - the relationship between the amount of pollutant a person is exposed to (dose) and the increase risk of disease (effect). Usually the greater the dose, the greater the effect.
<u>Electrical systems</u> - the system of wires, lights, power generation equipment, and related facilities to produce, convey, and utilize electrical power in a building.
Encapsulation - the use of an agent to seal the surface (budging encapsulant) or penetrate the bulk (penetrating encapsulant) of ACM.
Enclosure - a resilient structure, built (or sprayed) around ACM designed to prevent disturbance and contain released fibers.

Epidemiology - the study of causes, occurrence and distribution of disease throughout a population.
Errors and omissions insurance - a type of insurance which protects professionals for mistakes they may make in contracted plans and recommendations.
Fireproofing - spray or trowel applied resistant materials.
Friable - material that can be crumbled or reduced to powder by hand pressure.
Functional space - spatially distinct units within a building which contain identifiable populations of building occupants.
General liability insurance - a type of insurance which covers the insured for damaged to property and person caused by his or her own negligence.
Heating, ventilating, and air-conditioning (HVAC) system - the system of pipes, ducts, and equipment (air conditioners, chillers, heaters, boilers, pumps, fans) used to heat, cool, move, and filter air in a building. HVAC systems are also know as mechanical systems.

High efficiency particulate air (HEPA) - a type of filter which is 99,97 percent efficient at filtering particles of 0.3 micrometers in diameter.
HEPA Vacuum Equipment - High efficiency, particulate air filtered vacuuming equipment with a filter system capable of collecting and retaining asbestos fibers. Filters should be of 99,97 percent efficiency for retaining fibers of 0.3 microns or larger.
Homogeneous areas - an area which appears similar throughout in terms of color, texture, and date of material application.
Exhibit 1 (Continued)
Indemnify - to pay for or pay back. Indemnification clauses in business contracts are intended to cover the cost of judgments and/or legal defenses in the event of litigation. These clauses are not used in ARS contracts.

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Latency period - the time between first exposure to a disease causing agent and the appearance of the

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<u>Liability</u> - being subject to legal action for one's behavior.
Lung cancer - a malignant growth of tissue in the lungs, specifically of the bronchi covering.
Mechanical systems - see HVAC systems.
Mesothelioma - a rare cancer of the lining around the lungs (pleura) or the abdomen (peritoneum). It is almost always caused by exposure to asbestos.
<u>Miscellaneous material</u> - interior building material on structural components, structural members or fixtures, such as floor and ceiling tiles, and does not include surfacing material or thermal system insulation (AHERA definition).
MSHA - Mine Safety and Health Administration.
Negative pressure respirators - respirators which function by the wearer breathing in air through a

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filter.
Negative pressure respirator check - a form of qualitative fit testing in which the wearer covers the filters of a negative pressure, air purifying respirator to check for leaks around the face seal.
NIOSH - National Institute of Occupational Safety and Health.
Occurrence insurance - a form of insurance in which a claim is allowed regardless of when the claim is filed. For asbestos insurance, the "occurrence" could be the time of first exposure.
Permissible exposure level (PEL) - a level of airborne fibers specified by OSHA as an occupation exposure standard for asbestos. It is 0.2 fibers per cubic centimeter of air, 8-hour time weighted average, as measured by phase contrast microscopy.
Phase contrast microscopy (PCM) - a method of analyzing air samples for fibers using a light microscope.
<u>Physical assessment</u> - assessing suspect material to determine the current condition of the material and the potential for future disturbance.

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Exhibit 1 (Continued)
Plenum - a horizontal space designed to transport air in a building. Plenum are commonly the space between a dropped ceiling and the floor above.
Pleura - the membrane encasing each lung.
Plumbing system - the system of pipes, valves, fittings and related components designed to convey liquid or gas fluids throughout a building. Some piping may also be part of the HVAC system.
Polarized light microscopy (PLM) - a method of analyzing bulk samples for asbestos in which the sample is illuminated with polarized light (light which vibrates in only one plane) and viewed under a light microscope.
Positive pressure respirator check - a from of qualitative fit testing in which the wearer covers the exhalation valve of a negative pressure, air-purifying respirator to check for leaks around the face seal.

Protection factor (PF) - a number which reflects the degree of protection provided by a respirator. It is calculated by dividing the concentration of contaminant outside the mask by the concentration inside the mask.
Qualitative fit testing - testing the fit of a respirator by a subjective evaluation for leaks around the face seal.
Quality assurance - a program for collecting and analyzing additional samples of suspect material to check on the reliability of procedures.
Quantitative fit testing - testing the fit of a respirator by calculating concentrations of contaminants inside and outside the mask. This requires the use of instruments.
Rales - cracking sound in the lower half of the lung; symptomatic of progressing Asbestosis.
Recreated areas - areas where fiber levels exceed OSHA's permissible exposure limit.
Respiration - the exchange of gases in the lungs.

Respiratory tract - the organs of the body which convey air to the blood, allow exchanges of gases, an remove carbon dioxide.
Serpentine - one of the two major groups of minerals from which the asbestiform minerals are derived distinguished by their tubular structure and chemical composition. Chrysotile is a serpentine mineral.
Exhibit 1 (Continued)
Shop drawings - detailed drawings of selected items used in the construction of a building.
Significantly damaged friable surfacing material - friable surfacing (miscellaneous) ACM in a functional space where damage is extensive and severe (AHERA definition).
Specifications - a written set of standards, procedures, and materials for the construction of a building
<u>Submittals</u> - drawings or descriptive literature such as operating manuals transmitted to the building

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owner upon construction completion.
Surfacing material - in a school building that is sprayed-on, troweled-on, or otherwise applied to surfaces, such as acoustical plaster on ceilings and fireproofing materials on structural members, or other materials on surfaces for acoustical, fireproofing, or other purposes (AHERA definition).
<u>Surfactant</u> - A chemical wetting agent added to water to improve penetration, thus reducing the quantity of water required for a given operation or area.
Synergistic - the combination of two effects which is greater than the sum of the two independent effects.
Thermal system insulation - means material applied to pipes, fittings, boilers, breeching, tanks, ducts, or other interior structural components to prevent heat loss or gain, or water condensation, or for other purposes.
Tort - a legal wrong, sometimes referred to as negligence.
Transite - a trade name for asbestos cement wallboard and pipe.

Transmission electron microscopy - a method of analyzing air samples for asbestos fibers using a transmission electron microscope and, possibly, associated instruments for further identifying asbestos.
Tremolite - one of six naturally occurring asbestos minerals. Tremolite has few commercial uses.
Working drawings - a set of drawings which reflect the intended construction and appearance of the building. Also known as building plans.
Exhibit 2
MEDICAL QUESTIONNAIRES
This exhibit is taken from 51 FR 22747. The initial or annual medical questionnaire must be administered to all employees who are exposed to asbestos, tremolite, anthophyllite, actinolite, or a combination to these materials.

Part 1

INITIAL MEDICAL QUESTIONNAIRE

1. NAME
2. SOCIAL SECURITY #
1 2 3 4 5 6 7 8 9
3. CLOCK NUMBER
10 11 12 13 14 15
4. PRESENT OCCUPATION
5. PLANT
J. FLAIVI
6. ADDRESS

7. (ZIP CODE)
8. TELEPHONE NUMBER
9. INTERVIEWER
10. DATE
16 17 18 19 20 21
11. Date of Birth
Month Day Year 22 23 24 25 26 27
12. Place of Birth
13. Sex 1. Male
2. Female

14. What is your marital status: 1. Single 4. Separated/
2 Married Divorced 3. Widowed
15. Race 1. White 4. Hispanic 2. Black 5. Indian 3. Asian 6. Other
•
Exhibit 2 (Continued)
16. What is the highest grade completed in school? (For example 12 years in completion of high
school)
OCCUPATIONAL HISTORY
17A. Have you ever worked full time (30 hours 1. Yes 2. No per week or more) for 6 months or more?
1771. There you ever worked run time (50 hours 1. 105 2. 110 per week of more) for 0 months of more:

IF YES TO 17A:
B. Have you ever worked for a year or more in 1. Yes 2. No any dusty job? 3. Does Not Apply
Specify job/industry Total Years Worked
Was dust exposure: 1. Mild 2. Moderate 3. Severe
C. Have you ever been exposed to gas or 1. Yes 2. No chemical fumes in your work?
Specify job/industry Total Years Worked
Was exposure: 1. Mild 2. Moderate 3. Severe

D. What has been your usual occupational or job-the one you have
worked at longest?
1. Job occupation
2. Number of years employed in this occupation
3. Position/job title
4. Business, field or industry
(Record on lines the years in which you have worked in any of these industries, e. g. 1960-1969)
Have you ever worked: YES NO
E. In a mine?
F. In a quarry?
G. In a foundry?

H. In a pottery?
I. In a cotton, flax or hemp mill?
J. With asbestos?
Exhibit 2 (Continued)
18. PAST MEDICAL HISTORY
YES NO
A. Do you consider yourself to be in good health?

If "NO" state reason
B. Have you any defect of vision?
If "YES" state nature of defect
C. Have you any hearing defect?
If "YES" state nature of defect
D. Are you suffering from or have you ever suffered from:
a. Epilepsy (or fits, seizures, convulsions)?
b. Rheumatic fever?

c. Kidney disease?
d. Bladder disease?
e. Diabetes?
f. Jaundice?
19. CHEST COLDS AND CHEST ILLNESS
19A. If you get a cold, does it usually go to your 1. Yes 2. NO chest? (Usually means more than 1/2 the time) 3. Don't get colds_
20A. During the past 3 years, have you had any 1. Yes 2. NO chest illness that have kept you off work, indoors at home, or in bed?

IF YES TO 20A:
B. Did you produce phlegm with any of these chest 1. Yes 2. NO illness? 3. Does not apply
C. In the last 3 years, how many such illness Number of illnesses_with (increased) phlegm did you have which No such illness lasted a week or more?
21. Did you have any lung trouble before the age 1. Yes 2. No of 16?
22. Have you ever had any of the following?
1A. Attacks of bronchitis? 1. Yes 2. No
Exhibit 2 (Continued)

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IF YES TO 1A:
B. Was it confirmed by a doctor? 1. Yes 2. No 3. Does Not Apply
C. At what age was your first attack? Age in Years Does Not Apply
2A. Pneumonia (include bronchopneumonia)? 1. Yes 2. No
IF YES TO 2A:
B. Was it confirmed by a doctor? 1. Yes 2. No 3. Does Not Apply
C. At what age did you first have it? Age in Years Does Not Apply
3A. Hay Fever? 1. Yes 2. No

IF YES TO 3A:
B. Was it confirmed by a doctor? 1. Yes 2. No 3. Does Not ApplyC. At what age did it start? Age in Years Does Not Apply
23A. Have you ever had chronic bronchitis? 1. Yes 2. No IF YES TO 23A:
B. Do you still have it? 1. Yes 2. No 3. Does Not Apply
C. Was it confirmed by a doctor? 1. Yes 2. No 3. Does Not Apply D. At what age did it start? Age in Years Does Not Apply
24A. Have you ever had emphysema? 1. Yes 2. No IF YES TO 24A:

B. Do you still have it? 1. Yes 2. No 3. Does Not Apply
C. Was it confirmed by a doctor? 1. Yes 2. No 3. Does Not Apply
D. At what age did it start? Age in Years Does Not Apply
25A. Have you ever had asthma? 1. Yes 2. No
Exhibit 2 (Continued)
IF YES TO 25A:
B. Do you still have it? 1. Yes 2. No 3. Does Not Apply
C. Was it confirmed by a doctor? 1. Yes 2. No 3. Does Not Apply
D. At what age did it start? Age in Years Does Not Apply

E. If you no longer have it, at what age Age stopped Does Not Apply
26. Have you ever had:
A. Any other chest illness? 1. Yes 2. No
If yes, please specify
B. Any chest operations? 1. Yes 2. No
If yes, please specify
C. Any chest injuries? 1. Yes 2. No
If yes, please specify
27A. Has a doctor ever told you that you had 1. Yes 2. No heart trouble?
IF YES TO 27A:
B. Have you ever had treatment for heart 1. Yes 2. No trouble in the past 10 years? 3. Does Not Apply

28A. Has a doctor ever told you that you had 1. Yes 2. No high blood pressure?
IF YES TO 28A:
B. Have you ever had treatment for high 1. Yes 2. No blood pressure (hypertension) in the 3. Does Not Apply past 10 years?
29. When did you last have your (Years) x-rayed? 25 26 27 28
30. Where did you last have your chest x-rayed (if known)? What was the outcome?

Exhibit 2 (Continued)
FAMILY HISTORY
31. Were either of your natural parents ever told by a doctor that they had a chronic lung condition such as:
FATHER MOTHER
1. Yes 2. No 3. Don't 1. Yes 2. No 3. Don't Know Know
A. Chronic Bronchitis?
B. Emphysema?

C. Asthma?
D. Lung Cancer?
E. Other Chest
Conditions?
F. Is parent currently alive?
G. Please Specify Age if Living Age if Living
Age at Death Age at Death
Don't Know Don't Know
H. Please specify cause of death

COUGH

32A. Do you usually have a cough? (Count 1. Yes 2. No a cough with first smoke or on first going out of doors. Exclude clearing of throat.) [If no, skip to question 32C.]

- B. Do you usually cough as much as 4 to 1. Yes 2. No 6 times a day 4 or more days out of the week?
- C. Do you usually cough at all when getting 1. Yes 2. No out of bed?
- D. Do you usually cough at all during the 1. Yes 2. No rest of the day or at night?

Exhibit 2 (Continued)
IF YES TO ANY OF ABOVE (32A, B, C, D,), ANSWER THE FOLLOWING. IF NO TO ALL CHECK <u>DOES NOT APPLY</u> AND SKIP TO NEXT PAGE
E. Do you usually cough like this on most 1. Yes 2. No days for 3 consecutive months or more 3. Does Not Apply during the year?
F. For how many years have you had the Number of Years cough? Does not apply
33A. Do you usually bring up phlegm from your 1. Yes 2. No chest? (Count phlegm with the first smoke
or on first going out of doors. Exclude
phlegm from the nose. Count swallowed
phlegm.) (If no, skip to 33C)
B. Do you usually bring up phlegm like this 1. Yes 2. No as much as twice a day 4 or more days out
of the week?

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C. Do you usually bring up phlegm at all 1. Yes 2. No on getting up or first thing in the morning?
D. Do you usually bring up phlegm at all 1. Yes 2. No during the rest of the day or at night?
IF YES TO ANY OF ABOVE (33A, B, C, OR D), ANSWER THE FOLLOWING. IF NO TO ALL CHECK <u>DOES NOT APPLY</u> AND SKIP TO 34A.
E. Do you bring up phlegm like this on most 1. Yes 2. No days for 3 consecutive months or more 3. Does Not Apply during the year?
F. For how many years have you had trouble Number of Years with phlegm? Does not apply
EPISODES OF COUGH AND PHLEGM
34A. Have you had periods or episodes of 1. Yes 2. No (increased*) cough and phlegm lasting 3
weeks or more each year?
*(For persons who usually have cough
and/or phlegm)

IF YES TO 34A:
B. For how long have you had at least 1 such Number of Years episode per year? Does not apply
Exhibit 2 (Continued)
WHEEZING.
35A. Does your chest ever sound wheezy or whistling

1. When you have a cold? 1. Yes 2. No
2. Occasionally apart from colds? 1. Yes 2. No
3. Most days or nights? 1. Yes 2. No
VE VEG TO 1.0. OD 6 DV 67.4
IF YES TO 1,2, OR 3 IN 35A
B. For how many years has this been present? Number of Years Does not apply
36A. Have you ever had an attack of wheezing 1. Yes 2. No that has made you feel short of breath?
IF YES TO 36A:
B. How old were you when you had your first Age in years such attack? Does not apply
C. Have you had 2 or more such episodes? Number of Years Does not apply
D. Have you ever required medicine or 1. Yes 2. No treatment for the(se) attack(s)? 3. Does not apply

BREATHLESSNESS
37. If disabled from walking by any conditions
other than heart or lung disease, please
describe and proceed to question 39A.
Nature of condition(s)
38A. Are you troubled by shortness of breath when 1. Yes 2. No hurrying on the level or walking up a
slight hill?
IF YES TO 38A:
B. Do you have to walk slower than people 1. Yes 2. No your age on the level because of breath- 3. Does not apply lessness?
C. Do you ever have to stop for breath when 1. Yes 2. No walking at your own pace on the level? 3. Does not apply

D. Do you ever have to stop for breath after 1. Yes 2. No walking about 100 yards (or after a few 2 Does not apply minutes) on the level?
Exhibit 2 (Continued)
E. Are you too breathless to leave the 1. Yes 2. No house or breathless on dressing or 3. Does not apply climbing one flight of stairs?
TOBACCO SMOKING
39A. Have you ever smoked cigarettes? (No 1. Yes 2. No means less than 20 packs of cigarettes or 12 oz. of tobacco in a lifetime or less than 1 cigarette a day for 1 year.)
IF YES TO 39A:

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B. Do you now smoke cigarettes (as 1. Yes 2. No of one month ago) 3. Does not apply
C. How old were you when you first started Age in years regular cigarette smoking? Does not apply
D. If you have stopped smoking cigarettes Age Stopped completely, how old were you when you Check if still smoking stopped? Does not apply
E. How many cigarettes do you smoke per Cigarettes per day day now? Does not apply
F. On the average of the entire time you Cigarettes per day smoked, how many cigarettes did you Does not apply smoke per day?
G. Do or did you inhale the cigarette smoke? 1. Does not apply 2. Not at all 3. Slightly 4. Moderately 5. Deeply
40A. Have you ever smoked a pipe regularly? 1. Yes 2. No (yes means more than 12 oz. of tobacco in a lifetime.)
IF YES TO 40A:

FOR PERSONS WHO HAVE SMOKED A PIPE

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Not currently
smoking a pipe
E. Do you or did you inhale the pipe smoke? 1. Never smoked
2. Not at all
3. Slightly
4. Moderately
5. Deeply
41A. Have you ever smoked cigars regularly? 1. Yes 2. No (Yes means more than 1 cigar a week of a
year.)
IF YES TO 41A:
FOR PERSONS WHO HAVE EVER SMOKED CIGARS
D. 1. Hove old wore you when you started
B. 1. How old were you when you started
smoking cigars regularly? Age

2. If you have stopped smoking cigars 1. Age stopped completely, how old were you when
you stopped? 2. Check if still
smoking cigars
3. Does not apply
C. On the average over the entire time you Cigars per week smoked cigars, how many cigars did you Does not apply smoke per week?
D. How many cigars are you smoking per week Cigars per week now?
Check if not
smoking cigars
currently

Exhibit 2 (Continued)

E. Do you or did you inhale the cigar smoke? 1. Ne	ver smoked
2. Not at all	
3. Slightly	
4. Moderately	
5. Deeply	
Signature Date	
Exhibit 2 (Continued)	
Par	t 2
PERIODIC MEDICAL	QUESTIONNAIRE
1. NAME	
2. SOCIAL SECURITY #	
123456789	

3. CLOCK NUMBER
10 11 12 13 14 15
4. PRESENT OCCUPATION
5. PLANT
6. ADDRESS
_
7.
(ZIP CODE)
8. TELEPHONE NUMBER
9. INTERVIEWER

10. DATE
16 17 18 19 20 21
11. What is your marital status: 1. Single 4. Separated
2. Married Divorced 3. Widowed
12. OCCUPATIONAL HISTORY
12A. In the last year, did you work 1. Yes 2. No full time (30 hours per week
or more) for 6 months or more?
IF YES TO 12A:
B. In the past year, did you work 1. Yes 2. No in a dusty job? 3. Does Not Apply
C. Was dust exposure: 1. Mild 2. Moderate 3. Severe

D. In the past year, were you 1. Yes 2. No exposed to gas or chemical fumes in your work?
E. Was exposure: 1. Mild 2. Moderate 3. Severe
F. In the past year,
what was your: 1. Job/occupation?
2. Position/job title?
Exhibit 2 (Continued)
13. RECENT MEDICAL HISTORY
A. Do you consider yourself to
be in good health? Yes No

If "NO" state reason

B. In the past year, have you
developed: Yes No
Epilepsy?
Rheumatic fever?
Kidney disease?
Bladder disease?
Diabetes?
Jaundice?
Cancer?
14. CHEST COLDS AND CHEST ILLNESSES

A. If you get a cold, does it usually go to your chest?

(Usually means more than 1/2 the time) 1. Yes 2. No

3. Don't get colds

15A. During the past year, have you had
any chest illness that have kept you 1. Yes 2. No off work, indoors at home, or in bed? 3. Does not apply
IF YES TO 15A:
B. Did you produce phlegm with any 1. Yes 2. No of these chest illness? 3. Does not apply
C. In the past year, how many such Number of illnesses illnesses with (increased) phlegm No such illnesses did you have which lasted a week
or more?
16. RESPIRATORY SYSTEM
In the past year have you had:
Yes or No Further Comment on Answers
Positive

Asthma
Bronchitis
Hay Fever
Other Allergies
Exhibit 2 (Continued) Yes or No Further Comment on Answers Positive
Pneumonia
Tuberculosis

Chest Surgery
Other Lung Problems
Heart Disease
Do you have:
Yes or No Further Comment on Answers Positive
Frequent colds
Chronic cough
Shortness of breath
when walking or
climbing one flight

or stairs?
Do you:
Wheeze
Cough up phlegm
Smoke cigarettes Packs per day How many years
Date Signature

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